MINISTRY OF THE INTERIOR, EGYPT.

DEPARTMENT OF PUBLIC HEALTH.

FIFTH ANNUAL REPORT

ON THE.

OPHTHALMIC SECTION,

1917,

BY THE DIRECTOR OF OPHTHALMIC HOSPITALS.





CAIRO.
GOVERNMENT PRESS.

To be obtained, either directly or through any Bookseller, from the GOVERNMENT PUBLICATIONS OFFICE, Old Ismailia Palace, Sharia Qasr el CAini.

1919.

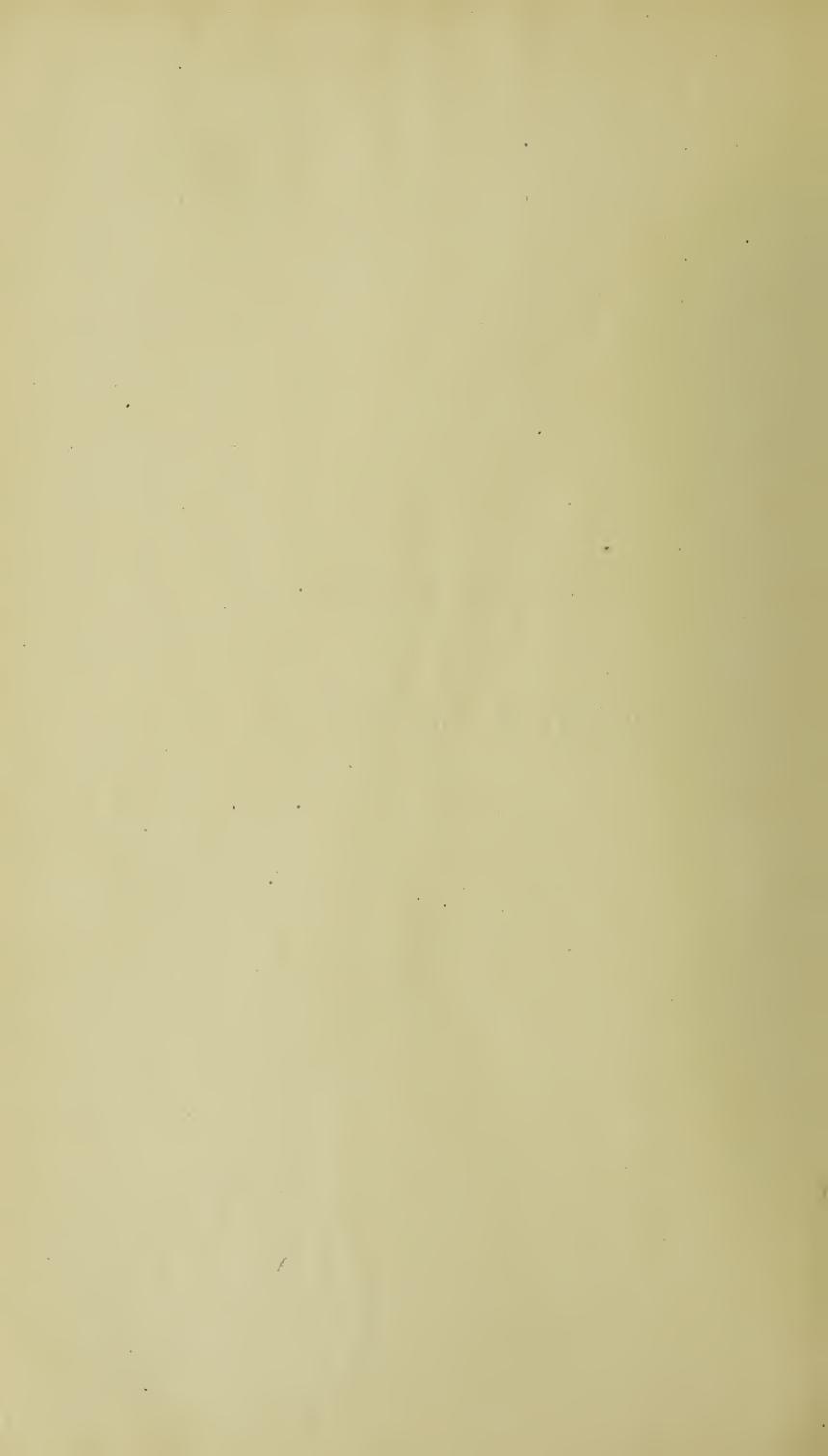
PRICE : P.T. 5.



FIFTH ANNUAL REPORT

ON THE

OPHTHALMIC SECTION, 1917.



MINISTRY OF THE INTERIOR, EGYPT.

DEPARTMENT OF PUBLIC HEALTH.

FIFTH ANNUAL REPORT

ON THE ·

OPHTHALMIC SECTION,

1917,

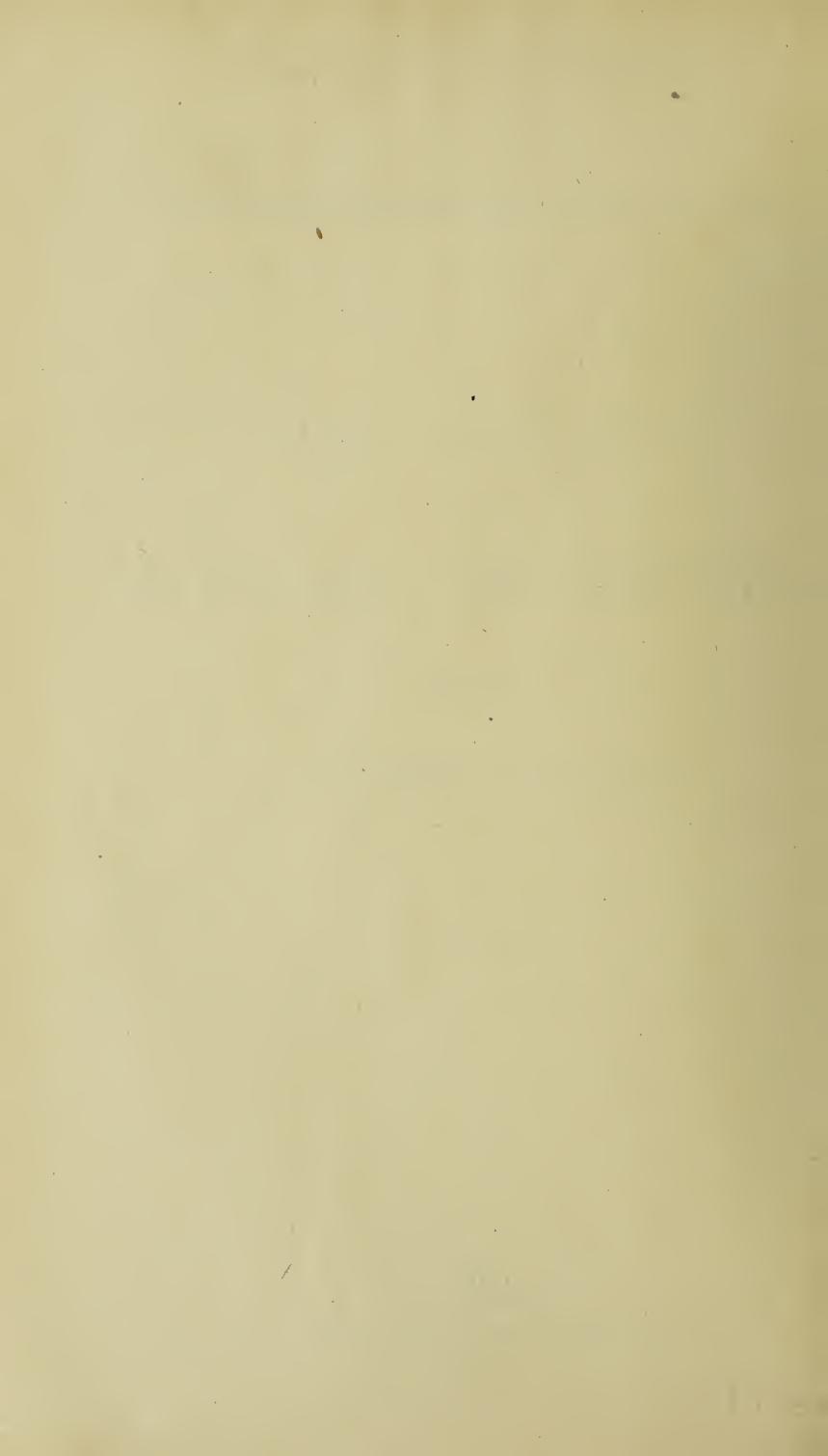
BY THE DIRECTOR OF OPHTHALMIC HOSPITALS.

CAIRO.
GOVERNMENT PRESS.

To be obtained, either directly or through any Bookseller, from the GOVERNMENT PUBLICATIONS OFFICE, Old Ismailia Palace, Sharia Qasr el CAini.

1919.

PRICE : P.T. 5.



Cairo,
February 14, 1918.

SIR,

I have the honour to enclose my Report on the Ophthalmic Hospitals and on Ophthalmic Progress in Egypt during the year 1917.

I have the honour to be,

Sir,

Your obedient servant,

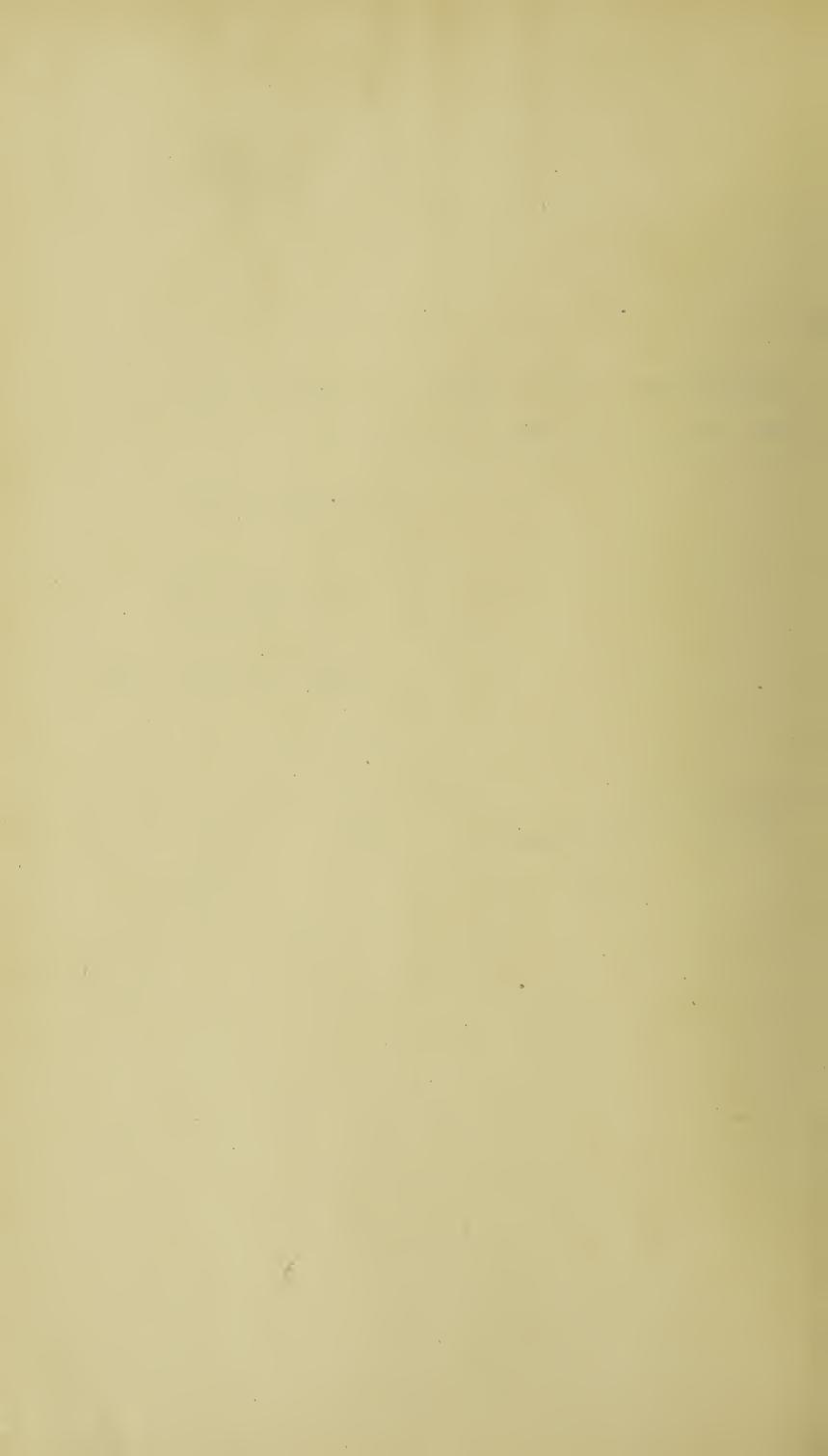
A. F. MACCALLAN,

Director of Ophthalmic Hospitals.

THE DIRECTOR-GENERAL,

DEPARTMENT OF PUBLIC HEALTH,

CAIRO.



CONTENTS.

											PAGE.
I.—Introduction	•••	•••	•••	•••	•••	•••			•••	•••	1
II.—Hospitals	•••	•••	•••	,	•••	•••	•••		•••	•••	1
A.—Travelling Hospitals	•••	•••		•••	•••	•••	•••	•••	•••	•••	1
B.—Permanent Hospitals	•••	`	•••	•••	•••	•••		•••	•••	•••	2
III.—Clinical				•••	•••			•••	•••	•••	2
IV.—Future Ophthalmic Policy		•••		•••	·	•••		•••	•••	•••	11
Annandiy . Publications											92

. . , f •

REPORT ON THE OPHTHALMIC SECTION, 1917.

I.—INTRODUCTION.

Ophthalmic Hospitals.—The number of permanent ophthalmic hospitals which have been built during the last eleven years is thirteen; these are now at work and are aided by four travelling hospitals.

Clinical Work.—The number of new patients treated in 1917 was 81,529. It was an increase of 19 per cent on those treated in 1916. The number of attendances of outpatients was 1,004,161. The number of operations performed was 59,581.

Finance.—The budgetary credit in 1917 was L.E. 21,047,* not including a sum of L.E. 4,001 granted at various times for equipment and drugs. Besides this, various provincial councils provided L.E. 3,323 for the maintenance of five hospitals. A total sum of about L.E. 28,371 was therefore available for ophthalmic purposes. The amount of money raised from local sources for capital expenditure, and thereby saved to the Government Treasury, now amounts to L.E. 54,107.

Age of Patients.—The importance of obtaining treatment for babies and children attacked by ophthalmia is beginning to be recognized by the people. More than 6 per cent of all the patients treated were under the age of one year, and 37 per cent were under the age of fifteen years.

Blindness.—13,996 or 13.9 per cent of all the patients examined were blind in one or both eyes. Of these, 4,611 were blind in both eyes. The cause of blindness in most cases was not trachoma but acute conjunctivitis or ophthalmia.

School Clinics.—School ophthalmic clinics are carried on at ten of the provincial primary schools at which there is a permanent hospital. At these clinics acute diseases of the eye and trachoma are treated, and spectacles are ordered for pupils who require them.

Ophthalmological Society.—The annual meeting of this Society was held in March 1917. The proceedings have been published in the annual bulletin of the Society.

Post-graduate Course of Ophthalmology.—A complete course of post-graduate lectures, including pathological and bacteriological demonstration and laboratory work, was given during 1917 by the Director with the assistance of the Inspectors.

II.—HOSPITALS.

A.—TRAVELLING HOSPITALS.

The two Cassel Fund hospitals have worked at Qena, Kafr el Dawâr, Benha, Gîza, Rosetta and Fuwa. The Daqahlîya Provincial Council hospital has worked at Fâriskûr,

^{*} This includes L.E. 2,560 derived from Sir Ernest Cassel's gift.

'Aga, Dikirnis and Simbillâwein. The Asyût Provincial Council hospital, a smaller and therefore a less efficient unit than the Daqahlîya hospital, has worked at Mallawi, Dairût, Abu Tîg, and Manfalût.

B.—PERMANENT HOSPITALS.

Permanent hospitals are working at Tanta, Asyût, Mansûra, Beni Suef, Zagazig, Damanhûr, Shibîn el Kôm, Sohâg, Minya, Faiyûm, Kafr el Zaîyât, Mahalla el Kubra, and Santa. (See Table XXII.)

III.—CLINICAL.

Number of Cases.—A résumé of the number of patients seen and the number of operations performed has been given in the introduction to this report. It has been found necessary to limit the number of patients treated as out-patients, in the interest, firstly, of the quality of the clinical work and, secondly, to avoid wearing out the hospital attendants and creating staleness among the medical officers. For these reasons, 12,154 of the less urgent cases were postponed on various occasions. From this it may be concluded that the ophthalmic organization has not as yet been able to cope with the demands made upon it.

Operations.—The operations performed for the relief of trichiasis and entropion were 30,200; these figures do not include the removal of individual lashes by electrolysis or epilation. The operations performed were those devised by Snellen, Anagnostakis and Van Millingen. Practically speaking, all cases of trichiasis and entropion resulting from trachomatous cicatrization can be dealt with successfully by one of these methods. Nineteen thousand minor operations for the treatment of trachoma were performed. Iridectomy for adherent leucoma was performed 2,112 times.

Acute Conjunctivitis.—As far as possible, all cases of acute and subacute conjunctivitis are examined under the oil-immersion lens of the microscope. During the last year, more than 12,000 such examinations were made (Table I.). In 37 per cent of the cases the causative organism was found to be the gonococcus, and in 21 per cent the Koch-Weeks bacillus. From an examination of the curve (Table II.) of the seasonal incidence of the gonococcus, it is seen that while comparatively rarely met with in January, February, March, and April, its activity becomes awakened in May and increases rapidly in July, reaching a maximum in August. In September there is a slight fall in the number of cases, but they increase again in October. In November a very rapid diminution occurs, persisting through December.

A curve of the temperature variations, if compared with the previously mentioned curve of the monthly incidence of gonococcal conjunctivitis, shows that rises and falls in the temperature curve precede by one month or two months rises and falls in the curve of gonococcal activity. A similar relation between the temperature and gonococcal activity was charted in my reports for 1914, 1915 and 1916.

A comparison of the temperature curve (Table III.), and curves for the diplo-bacillus of Koch-Weeks and for the bacillus of Morax-Axenfeld does not exhibit close relation, although the beginning heat of summer precedes the annual increase in activity of both organisms, and the fall of the average temperature in the autumn antedates the same seasonal diminution of the conjunctivitis caused by them.

In this connection Table IV. should be consulted, showing the monthly variations in the number of patients examined, which also bears a close relation with the temperature.

Table I.—Organisms found during 1917.

ORGANISMS.		Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	TOTAL.
Consession		110		68	76	187	233	670	817	760	825	677	972	A 701
Gonococcus Koch-Weeks	• • •	$\begin{array}{c} 110 \\ 102 \end{array}$	$\begin{array}{c} 65 \\ 110 \end{array}$			361	216		293		$\begin{array}{c} 323 \\ 273 \end{array}$	203	$\begin{bmatrix} 273 \\ 147 \end{bmatrix}$	$\begin{bmatrix} 4,761 \\ 2,699 \end{bmatrix}$
Morax-Axenfeld Diplo-bacillus	or	74	107	115		307	233	206	327	315	306	208	181	2,497
Pneumococcus Xerosis	0,	$\frac{15}{2}$	15 4		$\begin{array}{c} 31 \\ 12 \end{array}$	$\begin{array}{c} 68 \\ 21 \end{array}$	48 9	38 14	$\begin{bmatrix} 57 \\ 16 \end{bmatrix}$	$\begin{array}{c} 57 \\ 14 \end{array}$	$\begin{array}{c} 44 \\ 26 \end{array}$	48 7	$\begin{array}{c} 27 \\ 10 \end{array}$	$\begin{array}{c c} 479 \\ 155 \end{array}$
Staphylococcus	•••	3	1	1	_	2	10 3	10	28	32		3	3	
Streptococcus	• • •		1	1	_	2 2	2				2	_ 2		13
Other organisms Negative	•••	21 49	24 58	$\begin{array}{c} 20 \\ 84 \end{array}$		$\begin{array}{c} 17 \\ 167 \end{array}$	10 163	218	$\begin{array}{c} 11 \\ 175 \end{array}$	185	260	228	$\begin{array}{c} 4\\96\end{array}$	158 $1,777$
TOTAL	•••	379	385	484	600	1,134	927	1,464	1,724	1,675	1,748	1,381	741	$\boxed{12,642}$

Table II: Curves showing Variations of Temperature and Gonococcal Conjunctivitis.

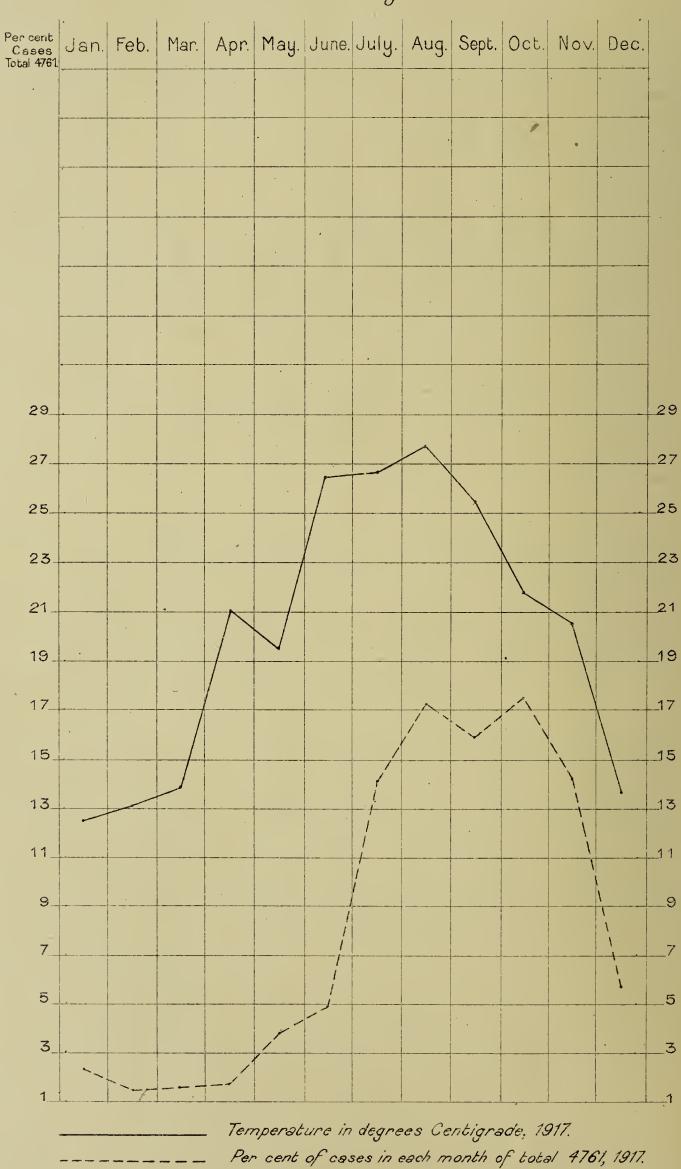


Table III : Curves showing Variations in Temperature and Conjunctivitis due to Koch-Weeks and Morax-Axenfeld Bacillus.

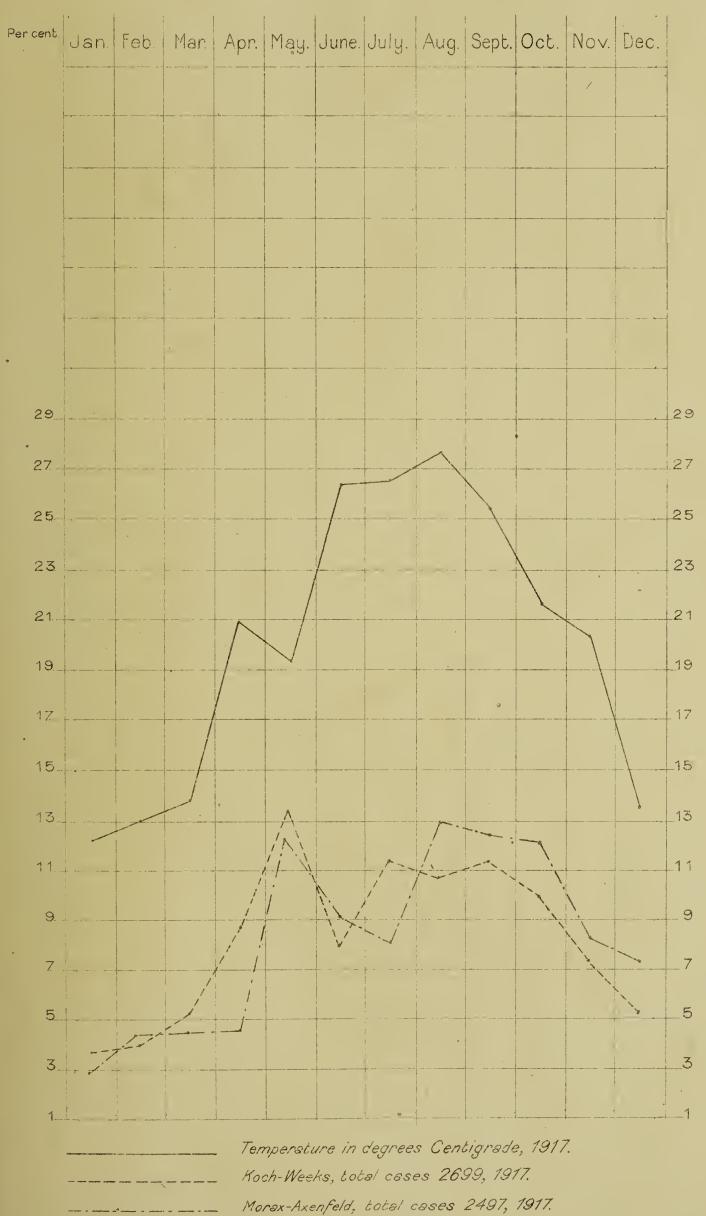
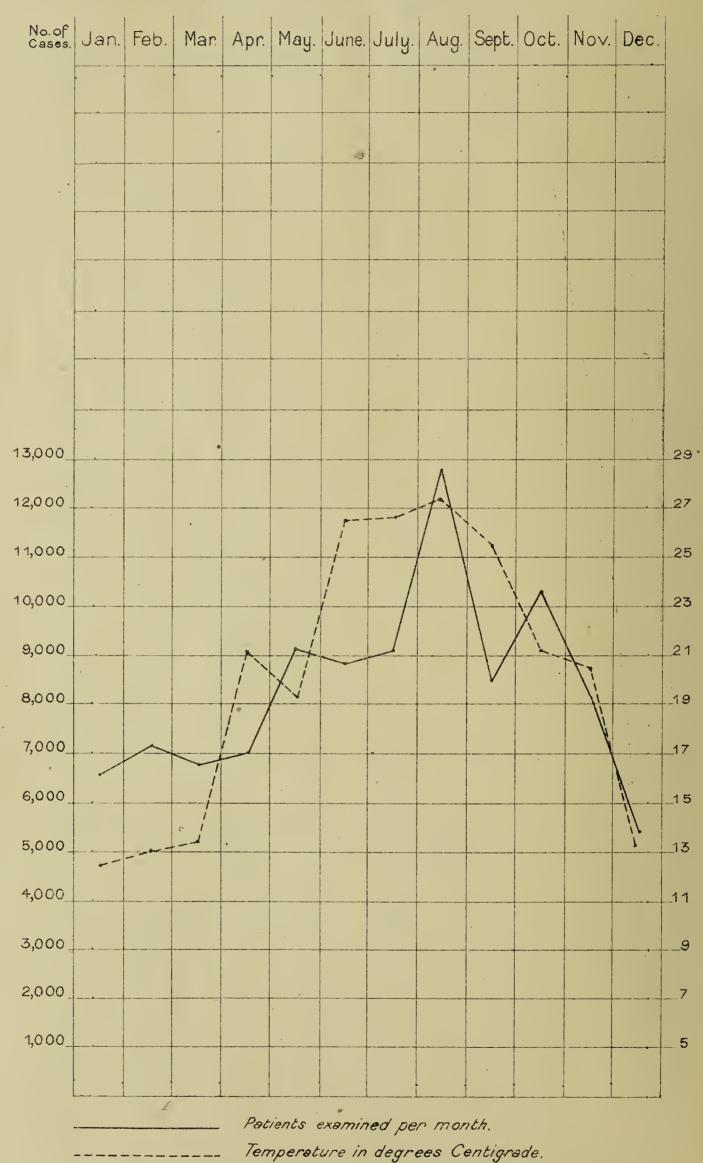


Table IV: Curves showing the Patients examined per month at the Ophthalmic Hospitals during 1917.



In this country blindness in one eye is not nearly such a serious disability as in European countries. It is true that it is impossible to enter the Government service as a clerk with rights of pension, or to get some of the technical jobs as a handicraftsman, but it is remarkable how well some men who are blind in one eye only manage to do work which requires a good judgment of distance.

Blindness in both eyes entails little of the misery which it entails in European countries; here, blind people are well cared for by their kin and, thanks to the sun, do not suffer severely from cold.

Owing to the large number of blind in Egypt, it would be a highly uneconomical thing to undertake charitable provision for them on any large scale when the prevention of blindness is so meagrely endowed; and the prevention of blindness should be by the provision of hospitals where early cases of acute conjunctivitis can be dealt with.

One is often asked the question as to whether blindness is diminishing in Egypt, and it is a difficult one to answer. There is no doubt that we meet with a smaller percentage of blindness than we used to do at the hospitals, and this is shown in Table V., where the percentage is seen to have diminished from 19 in 1911 to 11 in 1916. There is a rise in 1917 to 14, due to the large number of blind people seen at Minya (30 per cent), Qena (20 per cent), 'Aga (22 per cent), Asyût (18 per cent), Beni Suef (16 per cent).

This apparent improvement has been attributed to the fact that, while the establishment of new hospitals brings out all the old blind cases to enquire if something cannot be done for them, when the hospital has been running for about six months or a year these get finished off, and all the hospitals getting older the number of blind cases applying for treatment becomes smaller, being mainly those which have recently lost their sight. On the other hand, it is interesting to note that last year, when no new hospitals were opened, recorded blindness increased by 3 per cent above the 1916 figure.

Of course we depend on the hearty co-operation of all surgeons in recording all cases of blindness, and if this is not given all statistics are vitiated. As an interesting point, I exhibit statistics obtained from two provinces in which there were both permanent hospitals and travelling hospitals.

TABLE VI.

	1914	1915	1916	1917
Asyût (permanent)	14.2	10.1	11.7	18.4
Asyût (travelling):— Manfatût	{ 5·3 8·3 5·6 7·4 —	} 6·7	- 6·1 - 4·1	$ \begin{array}{r} 8 \cdot 9 \\ 8 \cdot 2 \\ \hline 6 \cdot 4 \\ \hline 9 \cdot 6 \end{array} $
Mansûra (permanent)	18.6	15•3	16.6	13.2
Daqahlîya (travelling) :— Mît Ghamr Mataria Dikirnis Fâriskûr Simbillâwein	16.5 8.6 11.2 — —	4·7 — — — — —	7·9 _ 7·1 _	10.6 22.3 10.7

The Asyût statistics are striking, in that the percentage number of blind is regularly greater at the permanent hospital in Asyût town than in the country or Markaz towns.

In the province of Daqahlîya and its capital town, Mansûra, the percentage at one of the country or Markaz towns is considerably higher than at Mansura; this is 'Aga, with

a percentage of 22·3 during the last year. Nor can I explain why the percentage was 16·5 in 1914 at Mît Ghamr, while it fell in the following year to 4·7, again rising in 1916 to about 8.

I think that we must suppose that when the percentage of blindness is high the medical officer has been energetic in noting all cases of blindness, and when the percentage is low that the reverse has been the case.

I desire to point out the very high percentage of blindness at Minya, 30.7 per cent of all the patients examined.

TABLE VII.—Total Percentage of Blindness in one or both Eyes.

	1914	1915	1916	1917
Permanent Hospitals :—				
Tanta	11	8.1	5.3	9.2
Asyût	14.2	10.1	11.7	18.4
Mansûra	18.6	15.3	16.6	13.2
Beni Suef	16.7	16.3	13.2	16.0
Zagazig	15.9	11.1	9.3	15.0
Damanhûr	16.8	11.4	11.8	13.5
CIL:1-11 17 1	18.5	11.9	11.8	10.2
O 1 4	10.7	15.3	14.3	14.03
N .		22.06	20.7	
T7 • ^			11.06	30.7
7/5 1 11 1 77 1	13.6	16.4		13
	7.0		17:03	12.2
Kafr el Zaîyât	7.8	10.5	8.3	12.6
Santa			10.06	13.7
CRAVELLING HOSPITALS:—				
No. 1 Camp:—	0.4			
Shibin el Qanâtir	21.7	11.8		
Minyet el Qamh	15	_	_	_
Kafr el Dawâr		_	12.7	11.9
Qena		_		20.5
Benha		_		10.7
No. 2 Camp:—				
Maghâgha	22.9		_	
Damietta	9.6		\	
Barrage		5.8		
Gîza			10.5	12.6
Rosetta		_		15.7
Fuwa			_	12.6
Asyût No. 1:—				
Manfalût	5.3	6.7		8.9
Manfalût	8.3	_		
Dairút	7.4			<u>-</u> 6·4
Mallawi	5.6		6.1	8.2
A 1 A 1			4.1	0 2
Abu Tîg			# I	9.6
				9 0
Daqahliya No. 1:—	10.5	4.7	7.0	
Mit Ghamr	. 16.5	4.7	7.9	_
Mataria	8.6		_	
	11.2	_	_	10.6
		_	7.1	_
	–		-	22.3
Simbillâwein		_	_	10.7

TABLE VIII.—Blindness per Age during 1917.

Hospital.	Under 1 year.	From 1-5.	From 6-10.	From -11-15.	From 16-20.	From 21–40.	Over 40 years.	Total.
No. 1 Camp No. 2 Camp Tanta Asyût Mansûra Beni Suef Zagazîg Damanhûr Shibîn el Kôm Sohâg Minya Faiyûm Mahalla el Kubra Kafr el Zaîyât	$\begin{bmatrix} 22 \\ 21 \\ 10 \\ 20 \\ 15 \\ 2 \\ 13 \\ 8 \\ 61 \\ 23 \\ 6 \\ 6 \end{bmatrix}$	37 35 63 56 48 30 40 29 30 10 68 24 31 32	53 39 44 65 45 40 38 25 31 18 83 44 15 25	92 59 46 67 47 95 55 47 40 54 55 41 32 18	82 37 27 72 49 60 59 48 46 52 70 46 30 32	319 285 294 513 358 352 298 322 214 283 626 336 145 240	626 321 291 642 264 282 322 275 149 276 606 429 187 62	1,228 777 787 $1,436$ 821 879 827 748 523 701 $1,569$ 943 446 415
Santa Asyût No. 1 Daqahlîya No. 1	21	24 24 45	24 49 43	42 56 28	32 40 22	164 279 154	$ \begin{array}{r} 232 \\ 367 \\ 214 \end{array} $	· 537 846 513
Total	284	626	681	874	804	5,182	5,545	13,996

· The age of the patients who are examined and found to be blind is of considerable importance.

TABLE IX.

				Per Cent of Total examined.	Per Cent of Total Blind.	Per Cent of Patients of this Age.
Under one year From 1 to 5 years , 6 to 10 ,, 11 to 15 ,, 16 to 20 ,, 21 to 40 ,, Over 40 years	 	•••	 	 0·28 0·62 0·67 0·87 0·80 5·16 5·52	$\begin{array}{c} \cdot 2 \cdot 02 \\ 4 \cdot 47 \\ 4 \cdot 86 \\ 6 \cdot 24 \\ 5 \cdot 74 \\ 37 \cdot 02 \\ 39 \cdot 61 \end{array}$	5·5 7·9 7·4 10·9 11·9 18·5 33·7

From this it is seen that the percentage of the early years is low and that the major part of the blindness is composed of patients over twenty-one years of age.

Also, it is found that taking the various ages of all patients examined, there is a much larger proportion of blindness among those over twenty-one than those below.

The cause of blindness is nearly always (73 per cent) acute conjunctivitis (Table X.); the percentage due to glaucoma is very high (11 per cent).

TABLE X.

									1917
ongenital	• • •						•••		4
.cquired :— Conjunctivitis resulting in :—									
(a) Total corneal opacity									3,665
(b) Shrunken globe	• • •	• • •	•••	•••	• • •	• • •	•••		3,923
(c) Secondary glaucoma	• • •	• • •	•••	• • •	• • •	• • •	•••	***	2,498
	• • •	•••	•••	•••	•••	• • •		•••	$\tilde{1}, \tilde{577}$
(d) Other conditions	•••	• • •	•••	• • •	• • •	• • •	•••	•••	1,011
Fundus:									170
Optic Atrophy	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	178
Retinitis pigmentosa	• • •	• • •	• • •	• • •	•••	•••	• • •	•••	22
Various	•••	• • •	• • •	•••	***	• • •	•••	•••	254
Glaucoma absolutum :—									Se.
Monocular	• • •	• • •			• • •				893
Binocular				• • •	• • •			••	903
									1,201
	•••	• • •	• • •		•••				148
Injury	• • •	•••	•••	•••	• • •	•••	•••		$\overline{52}$
T-10-11-11-11-11-11-11-11-11-11-11-11-11-	• • •	•••	•••	•••	• • •	•••	•••		$\frac{32}{32}$
	• • •	•••	•••		•••	•••	•••		277
Iritis endogenous Various	• • •	•••	• • •	• • •	•••	• • •	• • •	A.	$\overline{422}$
various	• • •	• • •	•••	• • •	•••	•••	•••		
				To	TAL	•••			16,049

From an examination of 611,372 patients between the beginning of the year 1906 and the end of 1917, it has been found that 49,650 patients, or about 8 per eent, were blind in one eye; that 29,818, or about 5 per cent, were blind in both eyes; and that 79,468, or about 13 per cent, were blind in one or both eyes.

These statistics have been carefully made and full notes prepared in the case of each patient; the notes are still available and can be referred to.

Cataract.—The number of cases of extraction of senile cataract was 477. The number of soft cataracts removed by needling and curette was 194.

Glaucoma.—The total number of cases of primary glaucoma examined was 2,444. The operation of trephining with iridectomy continues to be the operation of election.

During the last six years 448,086 patients have been examined at the ophthalmic hospitals of Egypt, and of these 9,686 patients, or 2 per cent, were found to have signs of glaucoma. Full clinical notes of all these cases are in existence and can be referred to if required.

Cases of acute glaucoma are rarely seen, only 71 having applied for treatment during the last six years. Cases of sub-acute glaucoma are rather more frequent, 131 cases having been seen during the same period. The high percentage is made up almost entirely of chronic glaucoma, about half of whom do not apply for treatment until blindness has supervened, more than one per cent of all the patients who seek treatment at the ophthalmic hospitals being already blind in one or both eyes from this disease.

VARIETIES.	1912	1913	1914	1915	1916	1917	TOTAL.
Acute Sub-acute	3 10 829 282	12 17 902 217	17 23 574 $1,147$	8 28 396 1,194	19 15 436 1,113	12 38 552 1,842	71 131 3,689 5,795
Total	1,124	1,148	1,761	1,626	1,583	2,444	9,686
Total number of patients examined	43,668	62,233	75,398	71,930	94,447	100,410	448,086
Per cent of glaucoma cases	2.57	1.84	2:33	2.26	1.67	2.43	2.16
Per cent of absolute glaucoma cases	•65	•34	1.52	1.66	1.17	1.83	1.29
Operations:— Iridectomy Trephining with iridectomy	60 152	28 317	25 428	30 464	78 534	153 655	374 2,550

TABLE XI.—Incidence of Primary Glaucoma.

Optic Atrophy.—The number of cases of optic atrophy seen, excluding those due to glaucoma, was 178. Their causes are classified as follows:—

TABLE XII.—Causes of Optic Atrophy.

											1917
. Post neur	itis—afte	er optic	c neu	ritis	•••	•••		•••			26
2. Consecutiv	re—to di	seases	of ret	ina oı	· cho	\mathbf{roid}		• • •	• • •		24
3. Primary	-Acute fo	evers		• • •	• • •		• • •	• • •			2 9
je.	Arterios	clerotic	c	• • •	• • •			• • •			5
	Auto-int	oxicati	ion			• • •			• • •		$\frac{2}{3}$
	Syphilis			• • •	• • •	• • •	•••	• • •		••	3
	Tabes		• • • • • • • • • • • • • • • • • • • •	• • •	•••	•••	•••	•••	•••	•••	4
	Hydroce	ephalus	,	•••	• • •	•••	• • •	•••	• • •	•••	1
. Anæmia	•••	•••	• •••	• • •	• • •	• • •	•••	• • •	•••	•••	3
. Unknown	•••	•••	• •••	• • •	• • •	• • •	•••	•••	•••	•••	8
				•		To	TAL	•••		,	178

The very large number of cases in which the origin of the optic atrophy is unknown is remarkable and will repay future investigation.

IV.—FUTURE OPHTHALMIC POLICY.

Of the fourteen provinces of Egypt, ten have already been provided with permanent ophthalmic hospitals. The four remaining provinces have projects for the provision of hospitals, viz.:—

- 1. Qalyûbîya Province.— A suitable piece of land belonging to the Government, at Benha, has been chosen and put aside for the purpose of establishing an ophthalmic hospital. The hospital will be established as soon as the Provincial Council of Qalyûbîya provides a sufficient amount for building and equipping. It will be maintained by the Government.
- 2. Gîza Province.—The Provincial Council of Gîza have voted a sum of L.E. 1,500 for purchasing the initial equipment of a travelling ophthalmic hospital, as such a hospital is more suitable for this province than a fixed one. It will be maintained by the Government at a cost of about L.E. 1,500 per annum.
- 3. Qena Province.—The Provincial Council of Qena have provisionally decided to provide a sufficient amount for building and equipping an ophthalmic hospital at Qena. The amount now available is L.E. 5,806. It will be maintained by the Government.
- 4. Aswân Province.—Aswân, owing to its poverty, has no hope of obtaining any means of permanent ophthalmic relief unless the Government comes to its aid with a grant of money to build and equip a hospital. A suitable piece of land belonging to the Government, at Aswân, has been chosen and put aside for the purpose of establishing an ophthalmic hospital.

The Provincial Council of Minya have voted a sum of L.E. 4,000 for building and equipping a hospital at Maghâgha. A site of one feddân has been presented by a notable, from Maghâgha, named El Masri Bey el Saâdi.

The amount of money which has been raised from local sources for the building and equipment of hospitals now amounts to L.E. 54,107.

9,675 2,847 81,5297,9389,2177,9656,74816,465 81,529 59,581 9,385 4,611 5,16828,028 27,341 1917 849,366 68,304 54,2057,042 3,50422,214 7,865 6,985 14,379 2,454 68,304 26,094 6,275 23,017 5,752 4,031 9,871 1916 52,752 735,919 2,274 2,992 19,220 19,149 5,762 18,492 5,229 5,637 10,104 5,651 4,491 1915 50,126 686,012 40,710 75,398 50,126 16,542 2,4726,394 6,425 21,624 5,634 4,570 17,257 9,850 2,071 10,554 3,591 3,949 1914 40,670 30,648 544,267 40,670 9,544 5,360 3,878 17,329 11,700 2,700 4,786 12,679 1,807 3,799 3,253 8,822 4,631 1913 21,315 4,115 13,176 28,029 7,200 6,942 28,029 3,2103,056 2,588 6,196 341,211 2,824 1,4953,317 8,167 1912 20,488 236,411 14,322 678 20,4883,196 3,933 1,903 6,116 2,811 5,589 7,871 2,101 2,051 2,067 1911 14,342 190,247 11,486 14,342 25,514 2,438 3,010 2,022 7,507 1,475 4,845 1,776 1,497 4,469 1,499 3,100 1910 12,092 9,930 10,060 177,761 22,373 1,385 12,092 2,302 2,116 3,128 516 1,645 1,442 1,291 1,156 3,775 2,206 1909 132,278 585 9027,794 6,426 2,262 247 849 1,550 1,1898,159 829 1,798 2,584 1908 146,830 7,446 6,794 184 1907 94,204 7,327 5,8461906 50,680 4,210 2,480 1905 15,039 1,282 49 2,954 1904 " eyes operated on and cu Total attendances of out-patients ... Operations performed ... New patients treated per age:-Patients regularly treated Patients examined... Trichiasis cases examined Blind in both eyes... ... Blind in one eye From 1 to 5 years ... Under 1 year Hospitals in existence:— 6 to 10 " 41 and over Permanent... New patients treated Incurable cases 21 to 40 Travelling ... In-patients... Details:—

TABLE XIII.—Permanent and Travelling Ophthalmic Hospitals.

TABLE XIV.—Work done at all Ophthalmic Hospitals during the Year 1917.

		1917
Nui	ATIENTS: Total number	2,847 208 $65,384$
II.—OPE	RATIONS:—	•
(1)	Major:— (a) Senile cataract 477 (b) Soft cataract 194 (c) Trichiasis 30,200 (d) Other operations 7,091	
(2)	Minor:— 37,962	
(2)	(a) Scraping lids of trachoma patients 4,490 (b) Other operations	
·	Total 21,619	
III —Our	-PATIENTS:	59,581
(1) (2) (3)	Incurable *	
	Total number of out-patient visits	1,004,161
(6)	Average number of visits made to hospital by each patient under regular treatment	12
(7) ⁻	regular treatment	11,900 3,354 2,948 11,977 44,825
(8)	Trichiasis cases seen among new patients:—	11,020
	(a) No previous operation having been performed 21,131 (b) Previous operation performed:— i. Successfully 2,061 ii. Unsuccessfully (not at an ophthalmic hospital, but probably	
	by some charlatan) 4,149	
	Total	27,341
• •	Ophthalmoscope and refraction cases	17,615 $5,422$
• •	Visits of constant wash cases	124,046
	(a) Under 1 year (b) From 1 to 5 years (c) , 6 , 10 , (d) , 11 , 15 , (e) , 16 , 20 , (f) , 21 , 40 , (g) Over 40 years	5,168 7,938 9,217 7,965 6,748 28,028 16,465
(13)	Origin of patients:— Town in which hospital is situated	29,947 31,301 20,281

^{*} Incurable cases do not receive tickets, but are recognized as both incurable and devoid of surgical interest.

[†] Incurable cases include those which are recognized as soon as seen by the surgeon as incurable but are given tickets for statistical or other purposes.

TABLE XV.—List of Diseases.

•																1917
Ametropia :—																
Hypermetropia	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••		33
Myopia	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	37
Astigmatism	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	30
Presbyopia	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		3
Conjunc t iva :—																
Conjunctivitis, s	$_{ m imple}$	в	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		2,20
	nuco-						•••	•••	•••	• · •	•••	•••	•••	•••		7,08
	gonoce				•••	•••	•••	•••	•••	•••	•••	• • • •	•••	•••		4,87
Other varieties	•••	•••	•••		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		1,41
Trachoma I	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	• • •	•••	•••	•••		4,23
" II…	•••	• • •	•••	• • •	• • •	•••	• • •	•••	•••	•••	•••	• • •	•••	•••		10,13
" III	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		73,31
" IV		•••	•••	۵ • • •	•••	•••		•••	•••	•••	•••	• • •	•••	•••		3,78
Spring catarrh		•••	•••	• • •	•••	•••	•••			• • •	•••	•••	•••	•••		
Post-trachomate	ous d	egen	erati	on	•••	•••	•••	•••	•••	•••	•••		•••	•••		14,61
Phlyctenule		•••	•••	•••	•••	•••	•••	•••	•••	•••		•••	•••	•••		3,16
Pterygium				•••	•••	•••	•••			•••	•••	•••	•••	•••		1,5
Pinguecula	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••				30
Xerosis	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		14
Symblepharon	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	Ç
Dermoid			•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••]
Other condition		•••	•••	•••	-	•••			•••	•••	• • • •	•••				
Argyrosis					•••											4
Colloid deg	ene r a						•••		•••	•••	•••	•••		•••		9
Hypertroph						•••	•••	•••	•••	•••	•••	•••	•••	•••		Į
Injuries (foreign						•••	•••	•••	•••	•••	•••	•••	•••	•••		Ę
Cyst		•		•		•••		•••	•••	•••	•••	•••	•••	•••		1
•	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	1	
YELIDS:—																7.5
Pediculosis cili		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	17
Trichiasis and e		pion	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	24,70
Distichiasis	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	į.
Ectropion	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	35
Lagophthalmos	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	1,33
Blepharitis	•••	• • • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		9,27
Hordeolum	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		35
Wart		•••	•••	•••	•••	•••	•••	•••	•••	•	• • • •	•••	•••	•••	•••	6
Meibomian cyst	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		20
Chalazion	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	•••	•••		20
Eczema	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	15
Rodent ulcer	•••	•••	•••	•••	•••		•••	••	•••	•••	•••	•••	•••	•••		
Dermoid	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	2 1904
Ptosis	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		18
Erysipelas	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	•••	•••		
Herpes	•••	•••	•••	•••	•••	•••	• • •	•••		• • •	• • •	•••	•••	•••	•••	1
Rodent ulcer	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		•••	•••	•••		
Other tumours	•••	•••	•••	•••	•••	•••	••	•••	•••	•••	•••	• • •	•••	• • •	•••	2
Fly larvæ	•••	<i>j</i> •••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		
ACRIMAL APPARATUS	•															
																4
Lacrimal fistula Stenosis of the	dnot	•••	•••				•••	•••	•••	•••	•••	•••	•••	•••	•••	2
Dacryocystitis,				•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	1
	açute chron			•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	44
Dislocated glan			•••	•••	,	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	
Distocated gran	u	• • •	• • •	• • •	• • •	• • •		• • •	• • •	• • •		• • •	• • •		•••	

TABLE XV.—List of Diseases (continued).

																1917
ORNEA :-																
	ceration, simple	•••														3,960
	,, hyopyon	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••		299
	norforatio		•••	•••	• • •	• • •	• • •	•••	•••	•••	•••	•••	•••	•••	***	1,202
	,, periorand, ,, special for			•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	176
Par	nnus	•••	•••	•••	•••	• • •	•••	•••	• • •		•••	•••	•••	•••	***	41,790
	ratitis, interstitial		• • • •	W.***	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	6
.1.0	1 1		•••	•••	•••	• • •	•••	•••	• • •	•••	•••	•••	•••	•••	•••	647
No	,, trachomato bula or leucoma		•••	• • •	•••	• • •	•••	•••	•••	•••	•••	• • •	•••	•••	***	33,652
	herent leucoma	•••	•••	•••	•••	•••	•••	• • •	• • •	•••	•••	•••	•••	• • •	•••	55,502
	cally opaque corne	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		•••	***	2,753
	phyloma		•••	•••	•••	•••	•••	• • •	• • •	• • •	•••	• • •	•••	• • •	•••	
	rosis of cornea	•••	•••	•••	•••	• • •	•••	•••	•••	••,•	•••	•••	• • •	•••	•••	1,602 305
	scess of cornea	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	• • •	• • •	•••	29
		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• 2 •	•••	
	nical cornea	1	1:		`	•••	•••	•••	• • •	•••	• • •	•••	•••	•••	•••	415
	uries (burn, foreig	gn bo	oaies	, etc	•)•••	***	•••	•••	•••	• • •	• • •	•••	•••	•••	•••	249
1718	tula	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	• • •	•••	•••	1
RIS:																
	terior synechia		•••	•••	•••		•••	•••	•••	•••	•••	•••	•••	•••		598
Pos	sterior "	•••	• • •	• • •	• • •	•••	•••	•••	• • •			•••	• • •	•••		329
Inf	dammation			•••	•••	• • •		•••		•••	•••	•••	•••	•••		345
Iri	s bombé		• • •				• • •	•••	•••	•••	•••	•••	•••			23
Tu	mour		• • •	•••		•••		•••		•••	•••		•••			1
	do-dialysis				•••	•••	•••				•••	•••				32
	ngenital coloboma		•••	•••	•••		•••		• • •	4.1.				•••		8
	iridia				•••	•••	•••		• • •			• • •	•••			4
	rsistent pupillary 1							•••		•••	•••	• • •	•••	•••		9
CLEROTI																700
	iary staphyloma	• • •	•••	•••	•••	• • •	•••	•••	•••	•••	•••	•••	• •	•••	•••	526
	iscleritis	• • •	•••	• • •	•••	• • •	•••	•••	•••	•••	• • •	•••	• • •	• • •	. • • •	10
Inj	uries	•••	•••	•••	•••	•••	•••	•••	•••	• • •	• • •	•••	• • •	• • •	•••	10
HOROID	•															
	oboma		*	•••		•••										6
	pture		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		1
	sseminated choroid		•••	•••		•••	•••	•••	•••	•••	•••	•••	•••			30
	oroido-retinitis	•••	•••	•••	•••	•••		•	•••	•••	•••	•••	•••	•••		14
	cophy of choroid	•••			•••	•••	•••	•••								$\frac{21}{24}$
	mours		•••	•••	•••		•••	•	•••	•••	•••	•••	•••	•••	•••	1
	oinismus	•••	•••	•••	•••	•••	•••	•••	· • • • •	•••	•••	•••	•••	•••	•••	3
2.2.1		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		
etina :-																
Re	tinitis, albuminuri	c an	d dia	abetic	c	• • •	• • •	• • •	• • •	• • •	• • •		• • •	• • •	•••	5
	" syphilitic	• • •		• • •	•••	•••	•••	• • •	•••	•••	• • •	•••	• • •	• • •		5
	" pigmentosa		• • •	•••	• • •	• • •	• • •	•••	• • •	•••	•••	• • •	• • •	• • •	•••	41
De	tachment of retina	a	• • •	• • •	• • •	• • •	• • •	• • •	•••	•••	•••	• • •	• • •	• • •		49
En	abolism and throm	bosis	s of 1	etina	al ve	essels	•••	• • •	• • •	•••	•••	• • •	•••	•••		2
	oma	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	• • •	•••	•••		3
	ner conditions	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	12
)nm- a N																
IDMIT OF T	erve:—															24
	* , *															
Ne	uritis									•••	•••	•••	•••	• • •	•••	34
Ne Atı	ophy ophy solutions	•••		•••		•••		•••		•••	•••	•••	•••	•••	•••	188 . 24

TABLE XV.—List of Diseases (continued).

																	7
																	1917
Lens:	:																
	Cataract, se	mile															1,606
	•	oft	•••	•••	•••	• • • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	227
	"	aumatic	•••		•••	•••		•••	•••	•••	•••	•••	•••	•••	•••	•••	37
	,,	mellar	•••	•••	•••	•••	•••	•••	•••	•••	•••	· • • •	•••	•••	•••	•••	14
	**	nterior po		•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	418
		osterior		• • •		•••	• • •		•••	•••	•••	•••	• • •	• • •	•••	• • •	26
	" d	islocated,	trav	ımati	ic	•••	• • •	•••	•••	•••	• • •	• • •	•••				68
	"	,,	oper	rative	e	• • •	•••	•••	•••	•••	• • •	•••	•••			•••	4
	"	"	cong	genit	al	•••	• • •	•••	•••	•••	•••	•••	• • •	•••	• • •	• • •	5
	Aphakia	•••	• • •	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	237
	Secondary		• • •	•••	• • •	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	204
	Complicated	d cataraci	t	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	48
VITRE	ous:—																
	Opacities	•															
	Opacines	•••	•••	• • •	•••	•••	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	64
Musci	77.0																
Direct	LES:—																
	Strabismus,	alternati	$_{ m ng}$	• • •	•••	• • •	•••	•••	•••	• • •			•••		•••		166
	"	converge	ent	•••	«		• • •				•••	•••	• • •				1,585
	"	divergen	ıt	• • •	• • •	• • •	•••	• • •	•••	•••	•••		•••		•••		1,318
	Nystagmus	•••	• • •	• • •	• • •	•••	• • •	•••		•••	• • •	• • •	•••		•••	•••	545
	Paralysis	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	• • •	•••	•••	11
a																	
GLAUC	DOMA:—																
	Primary, ac	cute	• • •	•••	•••	•••	•••	•••		•••							12
		ub-acute	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	$\frac{12}{38}$
		hronic	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	$\begin{array}{c} 35 \\ 552 \end{array}$
	Secondary	•••		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	2,378
	Absolute	•••	• • •	• • •	• • •	• • •	•••	•••	•••	• • •	•••	•••	•••		•••	•••	1,842
												•				•••	1,012
GLOBE	E:—																
*	C1 1																
	Shrunken g		• • •	• • •	•••	•••	• • •	•••	•••	•••	• • •	• • •	•••	• • •	• • •	• • •	3,916
	Buphthalmo			•••	• • •	•••	•••	• • •	• • •	• • •	•••	• • •	•••	•••	• • •	•••	• 40
	Exophthalm		•••	• • •	•••	•••	• • •	•••	• • •	•••	•••	• • •	•••	•••	•••	• • •	1
	Panophthali		•••	•••	• • •	•••	•••	•••	• • •	•••	•••	• • •	•••	• • •	•••	•••	153
	Microphthal	lmos	•••	•••	•••	•••	•••	• • •	• • •	•••	•••	•••	•••	•••	•••	•••	· 12
Orbit	•																
Oubli	•—																•
	Tumours	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••				•••		19
	Cellulitis		• • •	•••	• • •	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	12
	Periostitis		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		•••	•••	•••	4
	Injuries		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	3
	Contracted	socket	•••		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	10
BLIND																	
DIME																	
	In one eye	• • • • • • • • • • • • • • • • • • • •			•••	•••	•••										9,385
	In both eye		•••	•••		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		4,611

TABLE XVI.—List of Operations.

YELIDS	s :—																191'
	Trichiasis a		ropic	on :—	•												00.0
	Snellen's Anagnostal	is	•••	•••	•••	•••	• • •	• • •	• • •	• • •	•••	•••	• • •	• • •	• • •	•••	22,3
	Snellen-An			• • •	• • •	• • •	• • •	• • •	• • •	•••	• • •		•••		• • • •	• • •	$1, \hat{1}$
	Canthoplas		•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	•••			2
	Grafting m		neml	brane	•••	•••	• • •	• • •	• • •	•••	•••	• • •	• • •	•••	• • •	•••	5, 7
	Electrolysis		•••	• • •	•••	•••	•••	•••	• • •	•••	•••	• • •	• • •	• • •	•••	•••	$\frac{40}{2}$
	Excision of Other opera		•••	• • •	•••	•••	•••	• • •	• • •	• • •	•••	•••	•••	•••	•••	•••	$-\frac{2}{2}$
For	Combined 6 Ectropion	excision	for	trich	iasis	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	
	Plastic	• • • • • • • • • • • • • • • • • • • •	• • •	•••	•••	• • •	• • •	•••	•••	•••	•••	• • •	•••	•••	•••	•••	
	MacCallan' Kenneth S		•••	•••	•••	•••	• • •	• • •	•••	• • •	•••	•••	·•••	• • •	• • •	•••	
	Other opera		•••	•••	• • •	•••		• • •	•••	•••	•••	•••	•••	•••	• • •		
For	· Symblepha	ron		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••		
For	\cdot Hordeolum	and C	halaz	zion	• • •		• • •	• • •	•••	• • •	• • •	• • •	•••	• • •	• • •		6
		•••	•••	•••	• • •	•••	• • •	•••	•••	•••	• • •	•••	• • •	•••	•••	•••	1
	rt excised stitching wor		•••	• • •	• • •	•••	• • •	•••	• • •	•••	• • •	•••	•••	• • •	• • •	•••	
1000		cesses	• • •	• • •	•••	•••	• • •	•••	•••		•••	•••	•••	•••	•••		2
	CTIVA :—									-							
For	Trachoma:																0.4
	Expression		• • •	•••	•••	• • •	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	3,4 $4,4$
	Scraping Combined	 excision	 of 1	Heisr	atlı	• • •	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	8
	Post-trache	matous	deg	enera	tion	•••	•••	• • •	•••	•••	• • •	•••	•••	• • •	•••		11, 5
Oth	er operation	is		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		3
Pte			•••	•••		•••	•••	•••	•••	•••	•••	•••	•••	•••	•••		80
Is:	lactomer for	adharar	at los	, 100m													2,1
TH	dectomy for visu			acom	a	•••	•••	•••	• • •	•••	•••	• • •	• • •	•••	•••	• • •	$\frac{2}{2}$
	//	glaucor		•••	• • •	•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••		$\bar{1}$
	,, pre	liminar				•••	•••	• • •	• • •	•••		•••	• • •	• • •	•••	•••	
	stoid cicatrix				•••	•••	•••	•••	• • •	•••	•••	•••	•••	• • •	• • •	•••	
	vision of ante				•••	•••	•••	• • •	•••	• • •	•••	• • •	• • •	•••	•••	•••	
LUX(cision of prol al Sac:—	iapse	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	• • •	•••	
	cision									•••				• • •	• • •		1.
	rious		•••	• • •	• • •		• • •	• • •	•••	•••	• • •	• • •	• • •	• • •	•••		2
	owth sclera		•••	•••	• • •	• • •	•••	• • •	•••	•••	•••	•••	•••	•••	• • •	•••	
Mu ENS :-	cocele syrin	ged	•••	•••	•••	• • •	•••	•••	•••	•••	• • •	•••	•••	•••	•••	•••	
	Senile Cata	aract :-	_													İ	
2 01				tomy				• • •	• • •	• • •	• • •				•••		4
_	Extraction "	after p	revio	ous ir	idect	tomy	y	•••	•••	• • •	• • •	• • •	•••	•••	•••		
	membrane		xtrac	tion:	D	iscis	sion	•••	•••	• • •	• • •	•••	• • •	•••	• • •	•••	4.
T O	Soft Catara Extraction																
	Discission		• • •	•••	• • •	• • •	•••	• • •	•••	•••	•••		• • •	• • •	•••		
	Curette eva	acuation	ı	• • •	• • •	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••		19
For	r membrane		ktrac	tion:	_				-								
	Discission Paracentes	•	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	• • •	• • •	• • •	•••	
	Capsuloton		•••	•••	•••	•••	1	•••	•••	• • •	• • •	•••	• • •	•••	•••		
	Capsule ex			•••	•••	•••	• • • •	•••			•••	•••	•••	•••	•••		
LOBE																	0
	Trephining								•••	• • •	•••	•••	•••	• • •	• • •	•••	$\frac{68}{48}$
•	Excision Evisceration			• • •					•••	•••	•••	•••	•••	• • •	• • •	•••	13
	Trephining		nea-s	$\frac{\dots}{\text{clera}}$	with	out	$irid\epsilon$	ecton		• • •	• • •	• • •	•••	• • •	•••		
RBIT:	_																
	ploration		•••	•••	• • •	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	
	enteration	•••	• • •	•••	•••	•••	•••	•••	• • •	•••	• • •	4	• • •	•••	• • •	•••	
T O	r Tumour Dermoid	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••		
"	Cellulitis	•••	•••	•••	•••	•••	• • •	•••	•••	• • •		•••	•••	•••	•••		
Con	rnea :—																
	Foreign bo			d	•••	•••	•••	•••	• • •	•••	• • •	•••	•••	•••	•••	•••	$\frac{2i}{2}$
	Saemisch's			•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	•••	•••	,
Тог	Cautery notomy and a			•.•• t.	•••	•••	•••	•••	•••	•••	•••	•••	•••	• • •	• • • •	•••	9
	iotomy and a				•••	•••	•••	•••	•••		•••			•••	•••		$2\overline{z}$
	ier måjor op	erations	3														

TABLE XVII.—Total of New Patients treated per Month at the Ophthalmic Hospitals during 1917.

	1917	1917
January	5,203 5,515 5,552 5,484 8,205 7,357	July 7,745 August 9,378 September 6,992 October 8,511 November 6,765 December 4,822 Total 81,529

TABLE XVIII.—Number of Patients treated and Operations performed at the Ophthalmic Hospitals during 1917.

PATIENTS	TREATED.	OPERATIONS PERFORMED.
Asyût	6,8	74 Asyût 4,668
Tanta	6,5	55 Tanta 4,580
Mansûra	6,0	88 Faîyûm 4,058
No. 1 Camp	5,3	11 Minya 3,953
Damanhûr	5,2	69 Mansûra 3,684
Faîyûm	5,2	66 Beni Suef 3,581
Zagazig	5,2	30 Asyût No. 1 3,580
Asyût No. 1	4,9	68 Shibîn el Kôm 3,560
Beni Suef	4,9	10 Sohâg 3,521
Minya	4,8	53 Zagazig 3,505
No. 2 Camp	4,6	36 No. 1 Camp 3,475
Shibîn el Kôm	4,1	84 No. 2 Camp 3,285
Daqahlîya No. 1	3,5	38 Damanhûr 3,262
Santa	3,5	28 Mahalla el Kubra 3,032
Sohâg	3,5	10 Daqahlîya No. 1 2,667
Mahalla el Kubra	3,4	94 Kafr el Zaîyât 2,630
Kafr el Zaîyât	3,2	
	Тотац 81,5	TOTAL 59,581

TABLE XIX.—Average Number of Operations per Month at the Ophthalmic Hospitals during 1917.

Hogneman	OPERA	ATIONS.
Hospitals.	Major.	Minor.
Asyût	226	163
Tanta	218	164
Faîyûm*	217	121
Mansûra	213	94
Beni Suef	213	86
No. 1 Camp	212	153
No. 2 Camp	206	123
Sohâg	201	92
Zagazig	198	94
Shibîn el Kôm	198	99
Minya	197	133
Daqahlîya Provincial Council No. 1 Camp	191	89
Asyût Provincial Council No. 1 Camp	190	168
Damanhûr	187	85
Santa	162	69
Mahalla el Kubra	153	99
Kafr el Zaîyât	146	73

TABLE XX.—Pathological Report.

(A) Specimens diagnosed microscopically (embedded, cut and stained).

							Number.
A CC attack of the life	Inflammation	(D		• ••• ••	• •••	•••	6
Affections of the lids	Tumours	Benign with Malignant	cysts	· · · · · · · · · · · · · · · · · · ·	• •,••	•••	2 8
		(;		• •••	•••	· ·
	Inflammation	••• •••				•••	$\frac{12}{24}$
A 00 11 0 13	$\mid ext{Trachoma} \ ext{Degeneration} : i :$	e. Hvaline. A	myloid, etc.	• •••	• •••	•••	$\frac{24}{7}$
Affections of the conjunctiva		(Benign				•••	7 8 0
,	Tumours	Malignant	* Sarcor	ma	• •••	•••	0 5
		((Caren	ionia	/	•••	J
	(Inflammation				• •••	•••	0
Affections of the lacrimal gland)	Cyst Benign		· ··· ··	• •••	•••	. 0
with duct	Tumours \dots) Benign Malignant	Sarcon	 ma		•••	0
		(Manghant	··· { Carcin	noma	• •••	•••	Ö
	(C Stanbulama	nontial wit	h accomó	l		
	1.6	Staphyloma, coma	partial, wit		•	.au-	1
	Conjunctivitis with ulcers -	Staphyloma,	total, with				
	ending in	} coma 	 s with atron	 hv	• •••	•••	0
		Phthisis bulk		• ••• ••	• •••	•••	0
	Tumours of	\int Benign, corn	a terms of the		• •••	•••	1
Affection of the globe	tunic	Malignant	··· { Retina ··· } Choro			•••	$0 \\ 1$
, 0	Retinitis	` ··· ···	••• •••		• •••	•••	Ĩ.
	Uveitis Trauma	• • • • • • • • • • • • • • • • • • • •	••• ••• ••	• ••• ••	• •••	•••	$egin{array}{c} 1 \ 2 \ 2 \end{array}$
	Infection after o		••• •••	· ··· ··	• •••	•••	
	Primary glaucor	(Szzmathatia	••• •••	• ••• •		•••	$\frac{2}{0}$
	Irido-cyclitis	Endogenous	••• ••• •••	· ··	• •••	•••	$egin{pmatrix} 0 \ 2 \end{matrix}$
	Irido-cyclitis	Gumma of c	iliary body	•••	• •••	•••	1
•							0
Affection of the orbit	Tumours	Malignant, s	arcoma	· · · · · · · · · · · · · · · · · · ·	• •••	•••	$\overset{\circ}{1}$
	Inflammation			• •••	• •••	•••	$\frac{1}{2}$
						_	
				Total			91
				10001	• •••	•••	O L
						=	
\			•				
(B) Specimens	diagnosed micros	scopically (har	dened and	sectioned)			
			•				
Affections of the lids	Cysts	•••	••• •••	•••	•••	•••	1
		- C':1:	1				
		Ciliary staph Equat. staph		•••	•••	•••	$\frac{1}{6}$
	~	Intercalary s	taphyloma	•••	•••	•••	6 3 3
	Conjunctivitis with ulcers <	Adh. leucoma Staphyloma,					3
Affections of the globe	ending in	coma	••• ••• •••	•••	• • •	• • •	12
		Staphyloma,			glauco	ma	29 27 2 0
		Irido-cyclitis Phthisis bulb	.wтып авгорг ni		•••	•••	2
	Primary glaucon			tioned of		•••	0
	Secondary glauce	oma not due to	above-men	шопеа са	tuses	• • •	1
						_	
				Tot	al	•••	85

TABLE XXI.—Receipts realized from Treatment Fees and Sale of Eye-Drops in the Government Ophthalmic Hospitals during 1917.

	1917		Sale of Eye-Drops.		
HOSPITAL.	Sale of Eye-Drops.	HOSPITAL.			
	L.E. M.		L.E. M.		
No. 1 Camp	. 12 840	Zagazig	14 535 ·		
No. 2 Camp	5 875	Damanhûr	12 120		
ranta	18 340	Shibîn el Kôm	16 . 085		
A syût	*15 998	Sohâg	6 722		
Mansûra	9 695	Minya	8 475		
Beni Suef	16 450	Faîyûm	16 730		
		TOTAL	153 865		

^{*} Plus L.E. 16 received as treatment fees.

TABLE XXII.—Source of Provision and Maintenance of Hospitals.

	· Provided by	MAINTAINED BY	DATE opened.
Permanent:—			
Tanta	Government grant	Government grant	1908
Asyût	Public subscription and Government grant	· ·	1911
Mansûra	Gift by Badrawi Pasha	,, ,,	1912
Beni Suef	Public subscription	,, ,,	1912
Zagazig	Provincial Council	,, ,,	1913
Mahalla el Kubr a	,, ,,	Provincial Council	1913
Kafr el Zaîyât	,, ,,	,, ,,	1913
Damanhûr	,, ,,	Government grant	1914
Shibîn el Kôm	Public subscription	,, ,, ···	1914.
Sohâg	,, ,,	,, ,,	1914
Minya	Provin c ial Council	,, ,,	1915
Santa	, , ,,	Provincial Council	1915
Faîyûm	,, ,,	Government grant	1916
Travelling:—			
No. 1 Camp	Sir Ernest Cassel	Sir Ernest Cassel	1904
No. 2 Camp	,, ,,	,, ,,	1905
Asyût Provincial Council	Provincial Council	Provincial Council	1912
Daqahlîya Provincial Council	,, ,,	,, ,, ,,	1913

TABLE XXIII.—Money raised from Local Sources for Capital Expenditure and thereby saved to the Government Treasury.

	В	ospi	TALS.						Private Donations.	Vote of Provincia Councils.
									L.E.	L.E.
Asyût			•••	•••	• • •		•••	• • •	5,004	
Mansûra	•••	• • •					• • •		5,000	-investible
Beni Suef					• • •	• • •	• • •		4,000	_
Zagazig			• • •	•••		• • •		•••	_	4,286
Damanhûr	•••				• • •	• • •	•••	• • •		5,000
Shibîn el Kôm				•••	• • •				5,422	_
Sohâg		•••					• • •	• • •	4,000	
Minya	• • •			•••		•••	•••	• • •		5,500
Faiyûm	• • •		• • •		• • •		•••	• • •		4,000
Qena	• • •	• • •	• • •	•••		•••		•••	_	1,600
Gîza	•••	• • •	• • •	• • •	• • •	•••	•••	• • •	_	1,500
Aswân	• • •			• • •	•••	• • •		• • •	155	_
Kafr el Zaîyât	• • •	• • •	•••	• • •	• • •		•••		_	2,200
Mahalla el Kubra	• • •		•••	• • •	• • •	•••		,		2,400
Santa				•••	•••	• • •				2,600
Asyût No. 1	• • •	• • •	•••	•••			•••	•••		720
Daqahlîya No. 1			•••	•••		• • •	•••	•••		720
1	•••		•••	•••		•••				
		\mathbf{T}	otal	•••	•••	•••	• • •		23,581	30,526
			Gı	RAND	To	TAL	•••	•••	54,	107

TABLE XXIV.—Average Temperature in 1917.

(Figures kindly supplied by the Director, Physical Department, Ministry of Public Works.)

MONTEN	Qorashîya (¹)	ZAGAZIG (1).	BENI SUEF (2).	А SYÛТ (¹).	TOTAL. AVERAGE.
MONTH.	1st. 16th.	1st. 16th.	1st. 16th.	1st. 16th.	TOTAL. AVERAGE.
January February March April May June July August September October November December	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{ c c c c } \hline 13 \cdot 4 & 11 \cdot 4 \\ 12 \cdot 6 & 16 \cdot 0 \\ 18 \cdot 5 & 19 \cdot 8 \\ 16 \cdot 6 & 20 \cdot 9 \\ 21 \cdot 7 & 28 \cdot 8 \\ 24 \cdot 8 & - \\ 25 \cdot 6 & 27 \cdot 4 \\ 24 \cdot 6 & 22 \cdot 8 \\ 20 \cdot 4 & - \\ - & 19 \cdot 8 \\ \hline \end{array} $	13·1 12·6 12·6 14·0 11·6 14·4 23·0 20·6 16·7 22·0 22·2 30·6 26·8 27·6 27·8 29·0 28·1 24·1 23·4 - - -	$\begin{array}{ c c c c c }\hline 11 \cdot 6 & 13 \cdot 4 \\ 14 \cdot 0 & 14 \cdot 8 \\ 13 \cdot 2 & 16 \cdot 4 \\ 24 \cdot 6 & 23 \cdot 6 \\ 19 \cdot 0 & 24 \cdot 0 \\ 25 \cdot 8 & 31 \cdot 7 \\ 28 \cdot 9 & 27 \cdot 7 \\ 27 \cdot 9 & 30 \cdot 5 \\ 29 \cdot 7 & 25 \cdot 2 \\ 22 \cdot 0 & 22 \cdot 3 \\ 20 \cdot 7 & 21 \cdot 5 \\ 16 \cdot 6 & 11 \cdot 1 \\\hline \end{array}$	100·3 12·5 104·1 13·0 110·4 13·8 168·8 21·1 156·4 19·6 212·0 26·5 186·0 26·6 222·3 27·8 203·6 25·4 153·4 21·9 101·9 20·4 82·4 13·7

The average temperature was arrived at by taking two places in Lower Egypt (Qorashîya and Zagazig) and two places in Upper Egypt (Beni Suef and Asyût) and obtaining an average figure from the mean temperature at each place on the 1st and 16th of each month. This is shown in above table, the readings being in degrees centigrade.

(1) = Mean of day
$$\frac{8h + 14h + 20h + Min}{4}$$
 (2) = Mean of day $\frac{Max. + Min}{2}$

APPENDIX.

PUBLICATIONS.

A. Annual.

- (1) Annual Report on Ophthalmic Hospitals, 1912, 1913, 1914, 1915, 1916, and 1917.
- (2) Bulletin of the Ophthalmological Society of Egypt, 1911, 1912, 1913, 1914, 1915, 1917, 1918.

B. Occasional.

- (1) Four Years' Work with the Ophthalmic Hospitals of Egypt. Annual Meeting, British Medical Association, 1907.
- (2) The Relief of Eye Disease in Egypt, with some Consideration of the Incidence of Blindness and Trachoma. Sixteenth International Medical Congress, Budapest, 1909. Reprints available.
- (3) The Egyptian Ophthalmic Hospitals. Annual Meeting, British Medical Association, 1910.

 Reprints available.
- (4) Ophthalmic Hospitals in Egypt. Ophthalmic Record, U.S.A., 1910. Reprints available.
- (5) Communication read at the Fourth International Blind Congress in Cairo, February 1911.

 Published in "Ophthalmoscope," 1911.
- (6) Les Divisions du Trachome, le Traitement de cette Affection et de ses Complications. "Archives d'Ophtalmologie," Septembre, 1911.
- (7) Trachoma and its Complications in Egypt. Cambridge University Press. London, 1913.

Govt. Press, 2325-1919-400 ex.





